

DEMONSTRATION OF OXYGEN THERAPY

The exhibit of oxygen therapy held in the exhibition room of the Academy Building on February 9th and 10th proved as successful as had been anticipated. Twenty-one exhibitors demonstrated oxygen tents or other types of equipment employed in oxygen therapy. In addition, two types of portable oxygen chambers were shown as well as respirators and other apparatus used for resuscitation. It is estimated that about 1200 physicians visited the exhibition during the two days. Each afternoon and evening, talks were given by authorities on the use of oxygen.

The exhibit was planned to stress the need for adequate methods of oxygen administration, and to acquaint physicians as well as inventors and manufacturers of oxygen tents, and the commercial firms which engage in the rental of tents and oxygen equipment, with the necessity of appreciating the conditions to be attained or avoided, and with the real menace of faultily designed or operated equipment. Minimum requirements were listed and emphasized, and it was pointed out that a patient in urgent need of oxygen may be made more restless and uncomfortable, and be actually harmed, by being placed in a tent in which oxygen concentration, temperature and humidity are not measured and controlled.

The administrators of hospitals in the metropolitan area as well as individual physicians had the opportunity to compare many types of oxygen tents, reducing valves, and other pieces of apparatus, and to acquaint themselves with their relative advantages and disadvantages for hospital and private use. It was brought out that the use of oxygen has been greatly limited by excessive cost. As a remedy for this situation a reduction of charges was urged, based on standardization and simplification of equipment, in anticipation of wider demand. At the same time the

use of the less expensive nasal inhaler was advocated for the purpose of partially relieving oxygen need, and for the milder cases or where the expense of a tent cannot be met, as well as when tents are not tolerated and an oxygen room is not accessible. The large variety of tents within one room enabled manufacturers to compare the relative advantages and disadvantages of their apparatus with that of others, so that improvement, simplification and reduction in cost will undoubtedly result shortly because of this opportunity. Stereomotorgraphs which showed successively and continuously, at a controlled rate, slides describing the principles of oxygen therapy, illustrated the value of this method of instruction.

The necessity for adequate sterilization of the tents and for protection against fire hazards was emphasized. The representatives of the City Department of Health who visited the exhibit were impressed with the necessity of some official action leading to new regulations of the Department in order to guard against cross infection through improper cleansing and sterilizing.

As a result of the exhibit four commercial firms have entered the business of renting tents to physicians. These firms, as well as others who sell oxygen, will also rent reducing valves so that oxygen may be purchased in high pressure tanks at a fraction of its cost when supplied in the less efficient low pressure tanks on sale at the corner drug stores. Firms which sell oxygen also agreed to discontinue the practice of misbranding their tanks as "medical oxygen" and selling them at a price greater than that charged for the same oxygen when purchased for commercial purposes. They also agreed to maintain proper ethical practices in the rental of equipment so that the same rental charge will be made whether the bill is paid by the patient directly or by the physician.

The success of the exhibit called attention to the possibility of using the exhibition room of the Academy for similar demonstrations designed to acquaint physicians with new types of therapeutic equipment and with the technique of newer forms of therapy.